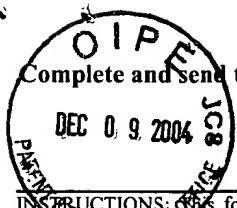


## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**
**Mail Stop ISSUE FEE**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**  
**or Fax (703) 746-4000**

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. If you are transmitting correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

32615

7590

11/09/2004

OSHA & MAY L.L.P./SUN  
 1221 MCKINNEY, SUITE 2800  
 HOUSTON, TX 77010  
 12/10/2004 WSPH2 00000087 09930373

01 FC:1501 1370.00 OP  
 02 FC:1504 300.00 OP  
 03 FC:8001 6.00 OP

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Yuki Tsukuda	(Depositor's name)
<i>[Signature]</i>	(Signature)
December 6, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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09/930,373

08/14/2001

Claude R. Gauthier

03226/103001; P6042

9205

TITLE OF INVENTION: METHOD FOR REDUCING A MAGNITUDE OF A RATE OF CURRENT CHANGE OF AN INTEGRATED CIRCUIT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

NO

\$1370

\$300

\$1670

02/09/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
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PERVEEN, REHANA

2116

713-001000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Osha &amp; May L.L.P.

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Sun Microsystems, Inc.

Santa Clara, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 2

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
- ☒ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0591 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

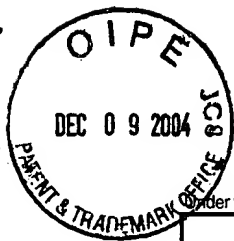
Date

Typed or printed name

Registration No.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PTO/SB/21 (09-04)  
Approved for use through 07/31/2006. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)		Application Number	09/930,373-Conf. #9205
		Filing Date	August 14, 2001
		First Named Inventor	Claude R. Gauthier
		Art Unit	2116
		Examiner Name	R. Perveen
Total Number of Pages in This Submission		Attorney Docket Number	03226/103001; P6042

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input checked="" type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	OSHA & MAY L.L.P.		
Signature			
Printed name	Jonathan P. Osha		
Date	December 6, 2004	Reg. No.	33,986

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: December 6, 2004

Signature: (Yuki Tsukuda)



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<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2005</h3> <p style="font-size: small; margin: 0;">Effective 10/01/2004. Patent fees are subject to annual revision.</p>		Complete if Known			
<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</div> <table style="width: 100%; border-collapse: collapse;"><tr><td style="width: 30%; border-bottom: 1px solid black;"><b>TOTAL AMOUNT OF PAYMENT</b></td><td style="border-bottom: 1px solid black;">(\$ ) 1,676.00</td></tr></table>		<b>TOTAL AMOUNT OF PAYMENT</b>	(\$ ) 1,676.00	Application Number	09/930,373-Conf. #9205
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		Filing Date	August 14, 2001		
		First Named Inventor	Claude R. Gauthier		
		Examiner Name	R. Perveen		
<table style="width: 100%; border-collapse: collapse;"><tr><td style="width: 30%; border-bottom: 1px solid black;"><b>TOTAL AMOUNT OF PAYMENT</b></td><td style="border-bottom: 1px solid black;">(\$ ) 1,676.00</td></tr></table>		<b>TOTAL AMOUNT OF PAYMENT</b>	(\$ ) 1,676.00	Art Unit	2116
		<b>TOTAL AMOUNT OF PAYMENT</b>	(\$ ) 1,676.00		
Attorney Docket No.	03226/103001; P6042				

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																																																																					
<div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Check    <input checked="" type="checkbox"/> Credit Card    <input type="checkbox"/> Money Order</div><div><input checked="" type="checkbox"/> Deposit Account    <input type="checkbox"/> None</div></div> <div style="margin-top: 5px;">Deposit Account Number: <span style="border: 1px solid black; padding: 2px 20px;">50-0591</span></div> <div style="margin-top: 5px;">Deposit Account Name: <span style="border: 1px solid black; padding: 2px 50px;">Osha &amp; May L.L.P.</span></div> <p style="font-size: small; margin-top: 5px;">The Director is authorized to: (check all that apply)</p> <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Charge fee(s) indicated below</div><div><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee</div></div> <div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17</div><div><input checked="" type="checkbox"/> Credit any overpayments</div></div> <p style="font-size: small; margin-top: 5px;">To the above-identified deposit account.</p> <div><input type="checkbox"/> Other (please identify): _____</div>		<h4 style="margin: 0;">2. EXTRA CLAIM FEES</h4> <table style="width: 100%; border-collapse: collapse;"><thead><tr><th style="text-align: left; font-weight: normal;">Fee Description</th><th style="text-align: right; font-weight: normal;">Fee (\$)</th><th style="text-align: right; font-weight: normal;">Small Entity Fee (\$)</th></tr></thead><tbody><tr><td>Each claim over 20</td><td style="text-align: right;">18</td><td style="text-align: right;">9</td></tr><tr><td>Each independent claim over 3</td><td style="text-align: right;">88</td><td style="text-align: right;">44</td></tr><tr><td>Multiple dependent claims</td><td style="text-align: right;">300</td><td style="text-align: right;">150</td></tr><tr><td>For Reissues, each claim over 20 and more than in the original patent</td><td style="text-align: right;">18</td><td style="text-align: right;">9</td></tr><tr><td>For Reissues, each independent claim more than in the original patent</td><td style="text-align: right;">88</td><td style="text-align: right;">44</td></tr></tbody></table> <div style="display: flex; justify-content: space-between; font-weight: bold; font-size: small; margin-top: 5px;"><div>Total Claims</div><div>Extra Claims</div><div>Fee (\$)</div><div>Fee Paid (\$)</div></div> <div style="display: flex; justify-content: space-between; font-size: small; margin-top: 5px;"><div>15</div><div>- 20 or HP =</div><div>x</div><div>=</div><div>0.00</div></div> <div style="font-size: small; margin-top: 5px;">HP= highest number of total claims paid for, if greater than 20</div> <div style="display: flex; justify-content: space-between; font-weight: bold; font-size: small; margin-top: 5px;"><div>Indep. Claims</div><div>Extra Claims</div><div>Fee (\$)</div><div>Fee Paid (\$)</div></div> <div style="display: flex; justify-content: space-between; font-size: small; margin-top: 5px;"><div>2</div><div>- 3 or HP =</div><div>x</div><div>=</div><div>0.00</div></div> <div style="font-size: small; margin-top: 5px;">HP= highest number of independent claims paid for, if greater than 3</div> <div style="display: flex; justify-content: space-between; font-weight: bold; font-size: small; margin-top: 5px;"><div>Multiple Dependent Claims</div><div>Fee (\$)</div><div>Fee Paid (\$)</div></div> <div style="display: flex; justify-content: space-between; font-weight: bold; font-size: small; margin-top: 5px;"><div>Subtotal (2) \$</div><div>0.00</div></div>		Fee Description	Fee (\$)	Small Entity Fee (\$)	Each claim over 20	18	9	Each independent claim over 3	88	44	Multiple dependent claims	300	150	For Reissues, each claim over 20 and more than in the original patent	18	9	For Reissues, each independent claim more than in the original patent	88	44																																																																		
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BASIC FILING FEE</h4> <table style="width: 100%; border-collapse: collapse;"><thead><tr><th style="text-align: left; font-weight: normal;">Fee Description</th><th style="text-align: right; font-weight: normal;">Fee (\$)</th><th style="text-align: right; font-weight: normal;">Small Entity Fee (\$)</th><th style="text-align: right; font-weight: normal;">Fee Paid (\$)</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td style="text-align: right;">790</td><td style="text-align: right;">395</td><td style="border-bottom: 1px solid black;"></td></tr><tr><td>Design Filing Fee</td><td style="text-align: right;">350</td><td style="text-align: right;">175</td><td style="border-bottom: 1px solid black;"></td></tr><tr><td>Plant Filing Fee</td><td style="text-align: right;">550</td><td style="text-align: right;">275</td><td style="border-bottom: 1px solid black;"></td></tr><tr><td>Reissue Filing Fee</td><td style="text-align: right;">790</td><td style="text-align: right;">395</td><td style="border-bottom: 1px solid black;"></td></tr><tr><td>Provisional Filing Fee</td><td style="text-align: right;">160</td><td style="text-align: right;">80</td><td style="border-bottom: 1px solid black;"></td></tr><tr><td colspan="2" style="text-align: right; font-weight: bold; font-size: small;">Subtotal (1) \$</td><td></td><td style="text-align: right; border-bottom: 1px solid black;">0.00</td></tr></tbody></table>		Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid (\$)	Utility Filing Fee	790	395		Design Filing Fee	350	175		Plant Filing Fee	550	275		Reissue Filing Fee	790	395		Provisional Filing Fee	160	80		Subtotal (1) \$			0.00	<h4 style="margin: 0;">3. OTHER FEES</h4> <table style="width: 100%; border-collapse: collapse;"><thead><tr><th style="text-align: left; font-weight: normal;">Fee Description</th><th style="text-align: right; font-weight: normal;">Fee (\$)</th><th style="text-align: right; font-weight: normal;">Small Entity Fee (\$)</th><th style="text-align: right; font-weight: normal;">Fee Paid</th></tr></thead><tbody><tr><td>1-month extension of time</td><td style="text-align: right;">110</td><td style="text-align: right;">55</td><td style="border-bottom: 1px solid black;"></td></tr><tr><td>2-month extension of time</td><td style="text-align: right;">430</td><td style="text-align: right;">215</td><td style="border-bottom: 1px solid black;"></td></tr><tr><td>3-month extension of time</td><td style="text-align: right;">980</td><td style="text-align: right;">490</td><td style="border-bottom: 1px solid black;"></td></tr><tr><td>4-month extension of time</td><td style="text-align: right;">1,530</td><td style="text-align: right;">765</td><td style="border-bottom: 1px solid black;"></td></tr><tr><td>5-month extension of time</td><td style="text-align: right;">2,080</td><td style="text-align: right;">1,040</td><td style="border-bottom: 1px solid black;"></td></tr><tr><td>Information disclosure stmt. Fee</td><td style="text-align: right;">180</td><td style="text-align: right;">180</td><td style="border-bottom: 1px solid black;"></td></tr><tr><td>37 CFR 1.17(q) processing fee</td><td style="text-align: right;">50</td><td style="text-align: right;">50</td><td style="border-bottom: 1px solid black;"></td></tr><tr><td>Non-English specification</td><td style="text-align: right;">130</td><td style="text-align: right;">130</td><td style="border-bottom: 1px solid black;"></td></tr><tr><td>Notice of Appeal</td><td style="text-align: right;">340</td><td style="text-align: right;">170</td><td style="border-bottom: 1px solid black;"></td></tr><tr><td>Filing a brief in support of appeal</td><td style="text-align: right;">340</td><td style="text-align: right;">170</td><td style="border-bottom: 1px solid black;"></td></tr><tr><td>Request for oral hearing</td><td style="text-align: right;">300</td><td style="text-align: right;">150</td><td style="border-bottom: 1px solid black;"></td></tr><tr><td>1504; 8001; 1501 Publication fee for early, voluntary, Other: or normal publication; Printed copy of patent w/o color; Utility issue fee</td><td></td><td></td><td style="text-align: right; border-bottom: 1px solid black;">1,676.00</td></tr><tr><td colspan="2" style="text-align: right; font-weight: bold; font-size: small;">Subtotal (3) \$</td><td></td><td style="text-align: right; border-bottom: 1px solid black;">1,676.00</td></tr></tbody></table>		Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid	1-month extension of time	110	55		2-month extension of time	430	215		3-month extension of time	980	490		4-month extension of time	1,530	765		5-month extension of time	2,080	1,040		Information disclosure stmt. Fee	180	180		37 CFR 1.17(q) processing fee	50	50		Non-English specification	130	130		Notice of Appeal	340	170		Filing a brief in support of appeal	340	170		Request for oral hearing	300	150		1504; 8001; 1501 Publication fee for early, voluntary, Other: or normal publication; Printed copy of patent w/o color; Utility issue fee			1,676.00	Subtotal (3) \$			1,676.00
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Subtotal (3) \$			1,676.00																																																																																				

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	33,986
Name (Print/Type)	Jonathan P. Osha	Telephone	(713) 228-8600
		Date	December 6, 2004

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Dated: December 6, 2004

Signature: (Yuki Tsukuda)